UNITED STATES DISTRICT COURT

for the

Jogce Rula paugh Plaintiff(s) v.	Civil Action No. 18 CV 3678				
ST MARY'S COUNTY GOVENNONT) Defendant(s)					
SUMMONS IN A CIVIL ACTION					
To: (Defendant's name and address) St. MARY'S COUNTY GOVERNMENT PO Box 653 Llonard-bown, MD 20650					
A lawsuit has been filed against you.					
Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:					
CALIFORNIA, MD	20619				
If you fail to respond, judgment by default will be entered You also must file your answer or motion with the court.	ed against you for the relief demanded in the complaint.				
	CLERK OF COURT				
Date: 11 30 18	Signature of Clerk or Deputy Clerk				
	Signature of Cierk or Deputy Cierk				

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Civil Action No.

PROOF OF SERVICE

	(This section :	should not be filed with the court	unless required by Fed. R. Civ. P. 4 (1))	
	This summons for (nar	ne of individual and title, if any)	9	
was re	eceived by me on (date)	*		
	☐ I personally served	the summons on the individual at	(place)	1
	***		on (date) ; (or
	☐ I left the summons at the individual's residence or usual place of abode with (name)			
	, a person of suitable age and discretion who resides the			s there,
	on (date) , and mailed a copy to the individual's last known address; or			
	☐ I served the summo	ons on (name of individual)		, who is
	designated by law to accept service of process on behalf of (name of organization)			
			on (date) ; (or
	☐ I returned the summ	nons unexecuted because		; or
	☐ Other (specify):			
	My fees are \$	for travel and \$	for services, for a total of \$	0.00
	I declare under penalty	of perjury that this information is	s true.	
Date:	(40-00-00-00-00-00-00-00-00-00-00-00-00-0	*	Server's signature	
			server's signature	
			Printed name and title	
(0 x x x x x			Server's address	

Additional information regarding attempted service, etc: